

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90245 026 ***150.00

DOCUMENT # P95000025610

1. Entity Name
A-1 MACHINERY, CORP.

Principal Place of Business

**520 WOODGATE CIR
 SUNRISE FL 33326
 US**

Mailing Address

**520 WOODGATE CIR
 SUNRISE FL 33326
 US**

2. Principal Place of Business

8330 NW 58 St.
 Suite, Apt. #, etc.

3. Mailing Address

1872 Water Ridge Dr.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Miami, Fl.

City & State
Weston, Fl.

4. FEI Number **65-0584205**

Applied For
Not Applicable

Zip **33166** **Country** **US**

Zip **33326** **Country** **US**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LARA, MELISSA
 520 WOODGATE CIRCLE
 SUNRISE FL 33326**

7. Name and Address of New Registered Agent

Name **Lara, Melissa**
Street Address (P.O. Box Number is Not Acceptable) **1872 Water Ridge Dr.**
City **Weston, FL** **Zip Code** **33326**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ **Delete**
NAME **LARA, JULIO M.**
STREET ADDRESS **520 WOODGATE CIR**
CITY-ST-ZIP **WESTON FL 33326**

TITLE **SD** ☐ **Delete**
NAME **LARA, MELISSA**
STREET ADDRESS **520 WOODGATE CIRCLE**
CITY-ST-ZIP **SUNRISE FL 33326**

TITLE **D** ☐ **Delete**
NAME **GARCIA, SANTOS R**
STREET ADDRESS **11222 SW 3 ST**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ **Change** ☐ **Addition**
NAME **Lara, Julio M.**
STREET ADDRESS **1872 Water Ridge Dr.**
CITY-ST-ZIP **Weston, Fl. 33326**

TITLE **SD** ☒ **Change** ☐ **Addition**
NAME **Lara, Melissa**
STREET ADDRESS **1872 Water Ridge Dr.**
CITY-ST-ZIP **Weston, Fl. 33326**

TITLE ☐ **Change** ☐ **Addition**
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Julio M. Lara **4/16/02** **305-477-1990**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)